P009 Diet Motives and Dietary Quality in Vegans, Vegetarians, and Semi-Vegetarians

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Background: Plant-based diets have shown favorable dietary quality and chronic disease outcomes. However, differences in diet quality of vegan, vegetarians, and semi-vegetarians, considering motivations to adopt plant-based diets and nutrition literacy, are not well known.

Objective: Assess the quality of plant-based diets (vegan, vegetarians, and semi-vegetarians) and their association with motives and nutrition literacy.

Study Design, Setting, Participants: In this cross-sectional study, 222 participants recruited via social media ads completed an online survey and food frequency questionnaire. Majority of participants were female (85.6%), Caucasian (87.4%), and college-educated (85.6%).

Measurable Outcome/Analysis: The study used the Healthy Eating Index-2015 to measure dietary quality and the 64-item Nutrition Literacy Assessment Instrument to measure nutrition literacy. Participants selected their top motive for following their diet (8 options), which were categorized into health, ethics, or other (politics/taste). Kruskal Wallis and post-hoc tests were used to compare diet quality and nutrition literacy between diet types and motives.

Results: Of the respondents, 52.5% were vegan (no animal products), 22.9% were vegetarians (dairy and/or eggs, but no meat), and 24.7% were semi-vegetarians (meat ≤1x/week). When comparing diet types, vegans had higher diet quality (80.8 ± 6.5 out of 100, P < 0.001) compared to vegetarians (75.1 ± 9.1), and semi-vegetarians (76.8 ± 7.5). Ethics was the top diet motive for 69.4% of vegetarians, while health was the top motive for 50% of vegans and 45.3% of semi-vegetarians. Overall, ethics was the main motive for following a diet (49.3%), followed by health (40.8%), and other motivations (6.7%). Participants who selected health as their top motive had higher diet quality (80.6 ± 6.3, P = 0.002) than those who selected ethical reasons (77.1 ± 8.3) and other reasons (75.3 ± 8.9). No differences in nutrition literacy were observed between groups, the overall average score was 59.0 ± 3.1 (out of 64).

Conclusions: Participants had high diet quality and nutrition literacy. Adopting a diet primarily based on health and following a vegan diet were associated with better diet quality. Considering motivations can aid the development of tailored nutrition education to promote healthy dietary behaviors.

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P010 Exploring Associations Between Orthorexia, Adverse Childhood Experiences, and Weight Bias in College Nutrition Students

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Background: Orthorexia and weight bias have been reported as high as 70% in nutrition students. Adverse Childhood Experiences (ACEs) have been linked with conditions such as eating disorders, but there is little understanding of their relationship with orthorexia and weight bias.

Objective: To explore relationships between orthorexia, ACEs, and weight bias in college nutrition students.

Study Design, Setting, Participants: Undergraduate and graduate students enrolled in a nutrition program in twelve mid-southeast states in the US were recruited to participate in an anonymous online survey.

Measurable Outcome/Analysis: The ORTO-R was used to measure orthorexia tendencies, ACE questionnaire for adults to measure ACEs, and the Weight Attitude Implicit Association Test to measure weight bias. Survey data was analyzed using descriptive statistics, t-tests, and chi-squared tests via Stata15 software, with a significance level of P < 0.05.

Results: Of the 164 students who completed the survey, 92% were female, 82% were White, and 54% were found to have a moderate/strong weight bias. Around 50% identified as being from a dysfunctional family, and more than 43% experienced emotional abuse. Orthorexia tendencies (measured by each of the 6 items on the ORTO-R scale) were associated with several ACEs such as domestic abuse (P = 0.02), divorce (P = 0.03) and incarceration (P = 0.04). For weight bias, sexual abuse was the only ACE that had a statistically significant relationship (P = 0.01). No significant relationships were found between orthorexia tendencies and weight bias.

Conclusions: Weight bias and orthorexia remain issues for the nutrition profession, and ACEs may be an important contributor to addressing these issues. Further research is needed to explore this relationship with diverse and larger populations. Changes in the nutrition curriculum such as the inclusion of "Health at Every Size" and activities that dispel weight-based stereotypes are needed to bring awareness and prevent bias and orthorexia among nutrition students.

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